

HEALTH WORKER GUIDELINES FOR DIARRHOEA CONTROL AND PREVENTION IN CHILDREN LESS THAN 5 YEARS OF AGE

Background:

Diarrhoea in children less than 5 years of age is due to infections of the gastrointestinal tract caused by viruses (especially Rotavirus), bacteria: E.coli, salmonellae, shigellae and others. These diseases are transmitted through eating and drinking contaminated food or water or through faecal-oral spread.

Diarrhoeal diseases represent the second leading cause of death among children less than 5 years of age in Zimbabwe, causing more than one thousand (1000) deaths per year.

Surveillance goal:

Detect diarrhoea outbreaks promptly.
Monitor antimicrobial resistance during outbreaks of bacterial origin.

Standard case definition

Suspected case:

- Unusual and more frequent passage of loose watery stool:
- No dehydration- two or more of the following signs: alertness, feeding and drinking well.
 - Mild to moderate dehydration - two or more of the following signs: restlessness, irritability, sunken eyes, thirsty, skin pinch goes back slowly.
 - Severe dehydration – two or more of the following signs: lethargy or unconsciousness, sunken eyes, not able to drink or drinking poorly, skin pinch goes back very slowly.

Confirmed case:

Suspected case confirmed with stool culture for a known pathogen.

If you observe that the number of cases or deaths is increasing over a period of time:

- 1) Report the problem to the next level.
- 2) Investigate the cause for the increased number of cases or deaths and identify the problem.
- 3) Make sure that cases are managed according to IMNCl guidelines.
- 4) Encourage home-based therapy with oral rehydration.

Respond to action threshold;

If the number of cases or deaths increases to two times the number usually seen in a similar period in the past do the above four steps plus:

- Teach mothers about home treatment with oral rehydration and Zinc.
- Conduct community education about boiling and chlorinating water and safe water storage.
- Promote proper disposal of human waste.
- Promote safe food preparation and storage.
- Promote appropriate hand washing practices.
- Promote breast-feeding practices.

Analyse and interpret data;

Time: Graph cases and deaths to compare with same period in previous years. Calculate threshold limit values. Prepare graphs for “outpatient diarrhoea with some dehydration” and for “diarrhoea with severe dehydration”. Construct an epidemic curve when outbreaks are detected.

Place: Plot location of case households.

Person: Report monthly totals due to diarrhoea with some dehydration and also for diarrhoea with severe dehydration from outpatient services. Also report monthly inpatient total cases and deaths due to diarrhoea with severe dehydration.

Adapted from the updated IDSR guidelines 2012

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